



**GODDARD SPACE FLIGHT CENTER**  
**REQUEST FOR RADIATION SAFETY COMMITTEE ACTION**  
**NON-IONIZING RADIATION SOURCE (RF/EMF) USE APPROVAL**

<p>1. _____ Originator's Name: Last, First, MI      Code      Phone      Date</p> <p>_____ Organization Name and Mailing Address</p>	<p>Docket # _____</p>  <p>(RPO Use Only)</p>												
<p>2. Request for approval of: (Check all appropriate items)</p> <table style="width: 100%;"><tr><td><input type="checkbox"/> NASA procurement</td><td><input type="checkbox"/> Contractor procurement</td></tr><tr><td><input type="checkbox"/> Use on _____ Program</td><td></td></tr><tr><td><input type="checkbox"/> Change of controlling code</td><td><input type="checkbox"/> Modification of device or change in primary use</td></tr><tr><td><input type="checkbox"/> On Center Transfer</td><td><input type="checkbox"/> Off-Site use</td></tr><tr><td>From _____</td><td><input type="checkbox"/> Other      Explain _____</td></tr><tr><td>To _____</td><td></td></tr></table>		<input type="checkbox"/> NASA procurement	<input type="checkbox"/> Contractor procurement	<input type="checkbox"/> Use on _____ Program		<input type="checkbox"/> Change of controlling code	<input type="checkbox"/> Modification of device or change in primary use	<input type="checkbox"/> On Center Transfer	<input type="checkbox"/> Off-Site use	From _____	<input type="checkbox"/> Other      Explain _____	To _____	
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<input type="checkbox"/> On Center Transfer	<input type="checkbox"/> Off-Site use												
From _____	<input type="checkbox"/> Other      Explain _____												
To _____													
3. GSFC Equipment Control Number(s): _____	4. Operating Frequency (Hz) _____	5. Maximum Power (Watts) _____											
6. Contract under which work will take place: (if applicable) _____	7. Has a GSFC Form 23-28RF (Radiation Source Questionnaire) [for each source] been submitted to the Radiation Safety Committee? <div style="text-align: center;"><input type="checkbox"/> Yes      <input type="checkbox"/> No</div> Docket #(s) _____ (23-28RF attached)												
8. Program description or justification of change: <i>(make reference below to appropriate attached pages)</i> a. Program Outline: _____ b. Procedures and methods of Control: _____ c. Location of use: _____													
9. Individual responsible for control and accountability: Custodian: _____ <div style="display: flex; justify-content: space-between; width: 100%;"><div>Print Name</div><div>Signature</div><div>Code</div><div>Date</div><div>Phone</div></div>													
10. I have reviewed above and recommend approval.  _____ Signature of Section Head or Higher      Title      Code      Date      Phone													
<b>Committee use only</b>  <table style="width: 100%;"><tr><td style="width: 50%;">Approved/Disapproved</td><td style="width: 50%;">Approved/Disapproved</td></tr><tr><td>_____ RPO</td><td>_____ RSC Chairman</td></tr><tr><td>_____ Date</td><td>_____ Date</td></tr></table> <p>REMARKS:</p> <p style="text-align: right; margin-top: 20px;"><b>THIS APPROVAL EXPIRES ON:</b> _____ Date</p>			Approved/Disapproved	Approved/Disapproved	_____ RPO	_____ RSC Chairman	_____ Date	_____ Date					
Approved/Disapproved	Approved/Disapproved												
_____ RPO	_____ RSC Chairman												
_____ Date	_____ Date												

## **INSTRUCTIONS FOR COMPLETING THE GSFC 23-6RF**

Instructions for filling out GSFC Form 23-6RF, Request for Radiation Safety Committee Action - Non-Ionizing Radiation Source (RF/EMF) Use Approval. For additional guidance, refer to GPG 1860.3 (series) "Radio Frequency Radiation Safety."

### **ALL ITEMS MUST BE LEGIBLE**

- Block 1. If you do not have a GSFC Code designation, you must include a valid mailing address in the space provided. (Docket # will be entered by Safety & Environmental Division)
- Block 2. Be sure to check all applicable items.
- Block 3. Fill in the GSFC Equipment Control Number (ECN).
- Block 4. List the operating frequencies of each source.
- Block 5. Enter the Peak Power of the emitter (Average Power if Pulsed).
- Block 6. If the work is to be performed under a contract, indicate which contract, otherwise N/A.
- Block 7. If the custodian does not have a GSFC Form 23-28RF on file for this emitter, one must be filled out. If you do not have a copy of the 23-28RF or your copy does not have a docket number, please contact the Safety & Environmental Division, Radiation Protection Office.
- Block 8. On a separate sheet of paper, provide information:
  - a. Attach a description of the program and duration of radiation use.
  - b. Attach a copy of procedures used to prevent personnel exposure to hazardous electromagnetic radiation. Include a safety analysis which indicates hazard distances and power density levels.
  - c. Exact locations of use must be listed.

NOTE: If programs and procedures are the same as a previous GSFC Form 23-6RF application, you may refer to the application by the Docket # and explain any differences in detail.

- Block 9. Custodian responsibilities are explained in GPR 1860.3 (series), Section 1.6.
- Block 10. Approval must be from manager/supervisor other than the custodian of the source(s).

### **RETURN THE COMPLETED FORM TO CODE 250.2**

If you have any questions concerning this form, please contact the Safety & Environmental Division, Radiation Protection Office at 301-286-0280.